2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M76180

FILED Apr 11, 2006 Secretary of State

Entity Name: MR. AUTO INSURANCE OF DAYTONA BEACH, INC.

Current Principal Place of Business:	New Principal Place of Business:
S85 MASON AVE DAYTONA BEACH, FL 32117 US	
Current Mailing Address:	New Mailing Address:
85 MASON AVE DAYTONA BEACH, FL 32117 US	
El Number: 59-2889907 FEI Number Applied For () FEI N	umber Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
/EAL, TOM 885 MASON AVE DAYTONA BEACH, FL 32117 US	
The above named entity submits this statement for the purpose n the State of Florida.	of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered Agent	Date
Election Campaign Financing Trust Fund Contribution ().	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: DP () Delete Name: VEAL, TOM Address: 685 MASON AVE City-St-Zip: DAYTONA BEACH, FL 32117	Title: () Change () Addition Name: Address: City-St-Zip:
ritle: V () Delete Name: GRAVES, SUSAN J Address: 1441 N ATLANTIC AVENUE, #119 City-St-Zip: DAYTONA BEACH, FL 32118	Title: () Change () Addition Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TOM VEAL DP 04/11/2006